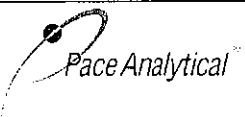


**MO#: 1273790**

State / Location	Year	Rate
Alabama	2000	10.0
Alabama	2001	10.0
Alabama	2002	10.0
Alabama	2003	10.0
Alabama	2004	10.0
Alabama	2005	10.0
Alabama	2006	10.0
Alabama	2007	10.0
Alabama	2008	10.0
Alabama	2009	10.0
Alabama	2010	10.0
Alabama	2011	10.0
Alabama	2012	10.0
Alabama	2013	10.0
Alabama	2014	10.0
Alabama	2015	10.0
Alabama	2016	10.0
Alabama	2017	10.0
Alabama	2018	10.0
Alabama	2019	10.0
Alabama	2020	10.0
Alabama	2021	10.0
Alabama	2022	10.0
Alabama	2023	10.0
Alabama	2024	10.0
Alabama	2025	10.0
Alabama	2026	10.0
Alabama	2027	10.0
Alabama	2028	10.0
Alabama	2029	10.0
Alabama	2030	10.0
Alabama	2031	10.0
Alabama	2032	10.0
Alabama	2033	10.0
Alabama	2034	10.0
Alabama	2035	10.0
Alabama	2036	10.0
Alabama	2037	10.0
Alabama	2038	10.0
Alabama	2039	10.0
Alabama	2040	10.0
Alabama	2041	10.0
Alabama	2042	10.0
Alabama	2043	10.0
Alabama	2044	10.0
Alabama	2045	10.0
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Alabama	2047	10.0
Alabama	2048	10.0
Alabama	2049	10.0
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Alabama	2052	10.0
Alabama	2053	10.0
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Alabama	2081	10.0
Alabama	2082	10.0
Alabama	2083	10.0
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Alabama	2085	10.0
Alabama	2086	10.0
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Alabama	2093	10.0
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Alabama	2095	10.0
Alabama	2096	10.0
Alabama	2097	10.0
Alabama	2098	10.0
Alabama	2099	10.0
Alabama	2100	10.0
Alabama	2101	10.0
Alabama	2102	10.0
Alabama	2103	10.0
Alabama	2104	10.0
Alabama	2105	10.0
Alabama	2106	10.0
Alabama	2107	10.0
Alabama	2108	10.0
Alabama	2109	10.0
Alabama	2110	10.0
Alabama	2111	10.0
Alabama	2112	10.0
Alabama	2113	10.0
Alabama	2114	10.0
Alabama	2115	10.0
Alabama	2116	10.0
Alabama	2117	10.0
Alabama	2118	10.0

SAMPLER NAME AND SIGNATURE		
PRINT Name of SAMPLER: Paul Martin		
SIGNATURE of SAMPLER: Paul Martin	DATE Signed: 8-31-16	
TEMP in C	Received on Ice (Y/N)	
	Custody Sealed Cooler (Y/N)	
	Samples Intact (Y/N)	

	Document Name: <b>Sample Condition Upon Receipt Form</b>	Document Revised: 23Feb2015 Page 1 of 1
	Document No.: <b>F-VM-C-001-Rev.09</b>	Issuing Authority: Pace Virginia, Minnesota Quality Office

**Sample Condition  
Upon Receipt**

Client Name:

Project #

**WO#: 1273790**

Courier: ☐ Fed Ex ☐ UPS ☐ USPS ☒ Client  
☐ Commercial ☐ Pace ☐ Other: \_\_\_\_\_



Tracking Number: \_\_\_\_\_

Custody Seal on Cooler/Box Present? ☐ Yes ☒ No

Seals Intact? ☒ Yes ☐ No

Optional: Proj. Due Date: \_\_\_\_\_ Proj. Name: \_\_\_\_\_

Packing Material: ☐ Bubble Wrap ☐ Bubble Bags ☐ None ☒ Other: \_\_\_\_\_

Temp Blank? ☒ Yes ☐ No

Thermometer Used: ☒ 140792808

Type of Ice: ☐ Wet ☐ Blue ☐ None

☒ Samples on ice, cooling process has begun

Cooler Temp Read °C: 4.3

Cooler Temp Corrected °C: 4.6

Biological Tissue Frozen? ☐ Yes ☐ No ☒ NA

Temp should be above freezing to 6°C

Correction Factor: 1.3

Date and Initials of Person Examining Contents: Ty Bll 8/31/16

Comments:

Chain of Custody Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	1.
Chain of Custody Filled Out?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	2.
Chain of Custody Relinquished?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	3.
Sampler Name and Signature on COC?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	4.
Samples Arrived within Hold Time?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	5.
Short Hold Time Analysis (<72 hr)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	6.
Rush Turn Around Time Requested?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	7.
Sufficient Volume?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	8.
Correct Containers Used?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	9.
-Pace Containers Used?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Containers Intact?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	10.
Filtered Volume Received for Dissolved Tests?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	11. Note if sediment is visible in the dissolved containers.
Sample Labels Match COC?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	12.
-Includes Date/Time/ID/Analysis Matrix: <u>WT</u>		
All containers needing acid/base preservation will be checked and documented in the pH logbook.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	See pH log for results and additional preservation documentation
Headspace in Methyl Mercury Container	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	13.
Headspace in VOA Vials (>6mm)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	14.
Trip Blank Present?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	15.
Trip Blank Custody Seals Present?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Pace Trip Blank Lot # (if purchased):		

**CLIENT NOTIFICATION/RESOLUTION**

Field Data Required? ☐ Yes ☐ No

Person Contacted: \_\_\_\_\_

Date/Time: \_\_\_\_\_

Comments/Resolution: \_\_\_\_\_

FECAL WAIVER ON FILE Y N

TEMPERATURE WAIVER ON FILE Y N

Project Manager Review: Martin Wood

Date: 9/1/16

Note: Whenever there is a discrepancy affecting North Carolina compliance samples, a copy of this form will be sent to the North Carolina DEHNR Certification Office (i.e. out of hold, incorrect preservative, out of temp, incorrect containers)